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L78 ANSWER 1 OF 3 REGISTRY COPYRIGHT 2002 ACS

RN 53910-25-1 REGISTRY

CN Imidazo[4,5-d][1,3]diazepin-8-ol, 3-(2-deoxy-.beta.-D-erythro-
pentofuranosyl)-3,4,7,8-tetrahydro-, (8R)- (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Imidazo[4,5-d][1,3]diazepin-8-ol, 3-(2-deoxy-.beta.-D-erythro-
pentofuranosyl)-3,4,7,8-tetrahydro-, (R)-

OTHER NAMES:

CN 2'-Deoxycoformycin

CN CL 67310465

CN Cl 825

CN Co-Vidarabine

CN Deoxycoformycin

CN Nipent

CN NSC 218321

CN Pentostatin

FS STEREOSEARCH

DR 59979-24-7, 63677-95-2, 69196-00-5, 70865-77-9

MF C11 H16 N4 O4

CI COM

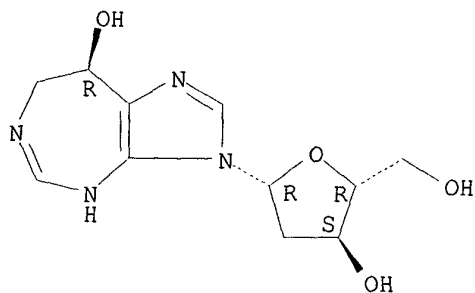
LC STN Files: ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*,
BIOBUSINESS, BIOSIS, BIOTECHNO, CA, CANCERLIT, CAPLUS, CBNB, CHEMLIST,
CIN, DDFU, DIOGENES, DRUGNL, DRUGPAT, DRUGU, DRUGUPDATES, EMBASE, HSDB*,
IFICDB, IFIPAT, IFIUDB, IPA, MEDLINE, MRCK*, MSDS-OHS, NAPRALERT, PHAR,
PROMT, RTECS*, TOXCENTER, USAN, USPAT2, USPATFULL

(*File contains numerically searchable property data)

Other Sources: WHO

Absolute stereochemistry.

Jan Delaval
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PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

589 REFERENCES IN FILE CA (1967 TO DATE)
 18 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
 589 REFERENCES IN FILE CAPLUS (1967 TO DATE)

REFERENCE 1: 136:363093
 REFERENCE 2: 136:354224
 REFERENCE 3: 136:323493
 REFERENCE 4: 136:315004
 REFERENCE 5: 136:304045
 REFERENCE 6: 136:289052
 REFERENCE 7: 136:257229
 REFERENCE 8: 136:257222
 REFERENCE 9: 136:247591
 REFERENCE 10: 136:240866

L78 ANSWER 2 OF 3 REGISTRY COPYRIGHT 2002 ACS

RN 21679-14-1 REGISTRY

CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Adenine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (8CI)

OTHER NAMES:

CN 2-Fluoro-9-.beta.-D-arabinofuranosyladenine

CN 9-.beta.-D-Arabinofuranosyl-2-fluoroadenine

CN 9-.beta.-D-Arabinosyl-2-fluoroadenine

CN F-ara-A

CN Fludarabine

CN NSC 118218

CN NSC 118218H

FS STEREOSEARCH

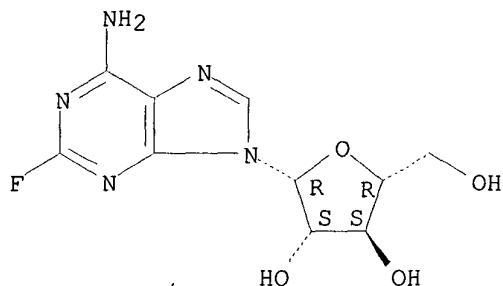
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LC STN Files: ADISINSIGHT, ADISNEWS, ANABSTR, BEILSTEIN*, BIOBUSINESS, BIOSIS, BIOTECHNO, CA, CANCERLIT, CAPLUS, CASREACT, CBNB, CHEMCATS, CHEMLIST, CIN, CSCHEM, DDFU, DIOGENES, DRUGPAT, DRUGU, DRUGUPDATES, EMBASE, IPA, MEDLINE, MRCK*, PHAR, PROMT, RTECS*, SYNTHLINE, TOXCENTER, USAN, USPATFULL

(*File contains numerically searchable property data)

Other Sources: EINECS**, WHO
 (**Enter CHEMLIST File for up-to-date regulatory information)

Absolute stereochemistry.



PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

477 REFERENCES IN FILE CA (1967 TO DATE)
 8 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
 482 REFERENCES IN FILE CAPLUS (1967 TO DATE)

REFERENCE 1: 136:384503
 REFERENCE 2: 136:363356
 REFERENCE 3: 136:350299
 REFERENCE 4: 136:339000
 REFERENCE 5: 136:334909
 REFERENCE 6: 136:334908
 REFERENCE 7: 136:315004
 REFERENCE 8: 136:304045
 REFERENCE 9: 136:303717
 REFERENCE 10: 136:288681

L78 ANSWER 3 OF 3 REGISTRY COPYRIGHT 2002 ACS

RN 154-42-7 REGISTRY

CN 6H-Purine-6-thione, 2-amino-1,7-dihydro- (9CI) (CA INDEX NAME)

OTHER CA INDEX NAMES:

CN Purine-6(1H)-thione, 2,3-dihydro-2-imino- (6CI)

CN Purine-6(1H)-thione, 2-amino- (7CI, 8CI)

CN Purine-6-thiol, 2-amino- (8CI)

OTHER NAMES:

CN 2-Amino-6-mercaptoguanine

CN 2-Amino-9H-purine-6(1H)-thione

CN 2-Aminopurine-6-thiol

CN 6-Mercaptoguanine

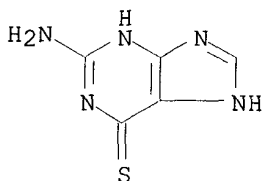
CN 6-TG

CN 6-Thioguanine

CN Guanine, thio-

CN NSC 752

CN Tabloid
CN Thioguanine
CN Tioguanin
CN Tioguanine
FS 3D CONCORD
DR 611-67-6, 1125-65-1, 1832-72-0, 5632-51-9
MF C5 H5 N5 S
CI COM
LC STN Files: ADISNEWS, AGRICOLA, ANABSTR, BEILSTEIN*, BIOBUSINESS, BIOSIS,
BIOTECHNO, CA, CANCERLIT, CAOLD, CAPLUS, CASREACT, CEN, CHEMCATS,
CHEMINFORMRX, CHEMLIST, CIN, CSChem, CSNB, DDFU, DIOGENES, DRUGU,
EMBASE, GMELIN*, HODOC*, HSDB*, IFICDB, IFIPAT, IFIUDB, IPA, MEDLINE,
MRCK*, NAPRALERT, NIOSHTIC, PIRA, PROMT, RTECS*, TOXCENTER, USAN,
USPAT2, USPATFULL
(*File contains numerically searchable property data)
Other Sources: EINECS**, WHO
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PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

1234 REFERENCES IN FILE CA (1967 TO DATE)
54 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA
1240 REFERENCES IN FILE CAPLUS (1967 TO DATE)
2 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

REFERENCE 1: 136:380088
REFERENCE 2: 136:379640
REFERENCE 3: 136:350786
REFERENCE 4: 136:334885
REFERENCE 5: 136:318973
REFERENCE 6: 136:318837
REFERENCE 7: 136:318830
REFERENCE 8: 136:315004
REFERENCE 9: 136:304045
REFERENCE 10: 136:299675

=> fil hcaplus

FILE 'HCAPLUS' ENTERED AT 16:17:59 ON 20 JUN 2002
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FILE LAST UPDATED: 18 Jun 2002 (20020618/ED)

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=> d all hitstr tot 177

L77 ANSWER 1 OF 13 HCAPLUS COPYRIGHT 2002 ACS
AN 2002:335943 HCAPLUS
TI HLA-haploidentical blood progenitor cell transplantation in osteopetrosis
AU Schulz, Ansgar S.; Classen, Carl Friedrich; Mihatsch, Walther A.; Sigl-Kraetzig, Michael; Wiesneth, Markus; Debatin, Klaus-Michael; Friedrich, Wilhelm; Muller, Susanna M.
CS Departments of Pediatrics and Transfusion Medicine, University of Ulm, Ulm, D-89075, Germany
SO Blood (2002), 99(9), 3458-3460
CODEN: BLOOAW; ISSN: 0006-4971
PB American Society of Hematology
DT Journal
LA English
CC 15-8 (Immunochemistry)
Section cross-reference(s): 1
AB Infantile osteopetrosis (OP) carries an extremely poor prognosis unless treated early by **hematopoietic** stem cell transplantation. We explored the use of purified blood progenitor cells from HLA-haploidentical parents in 7 patients lacking suitable matched donors. Blood progenitor cells were purified by pos. selection and by addnl. **T-cell** depletion using rosette formation. For conditioning, patients received busulfan, thiotepea, and either cyclophosphamide (5 patients) or **fludarabine** (2 patients). Stable donor engraftment developed in 6 of 7 patients. **Graft -vs.-host disease** was not obsd. Three of the 7 patients had no major complications and 4 of 7 had both veno-occlusive **disease** and respiratory failure. Five of 7 patients survive with complete cure of OP at a median of 4 yr. Patients with OP lacking HLA-matched donors can be successfully treated by transplantation of purified blood progenitor cells from HLA-haploidentical donors.
ST HLA progenitor cell transplant **graft host disease** osteopetrosis child
IT Human
Immunosuppressants
(HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)
IT Histocompatibility antigens
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(HLA-haploidentical blood progenitor cell transplantation in

osteopetrosis)

IT **Transplant and Transplantation**
(allotransplant; HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

IT Immunoglobulins
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(antithymocyte globulins; HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

IT Development, mammalian postnatal
(child; HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

IT **Transplant and Transplantation**
(graft-vs.-host reaction; HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

IT Bone, disease
(osteopetrosis; HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

IT **Hematopoietic precursor cell**
(stem; HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

IT 50-18-0, Cyclophosphamide 52-24-4, Thiotepe 55-98-1, Busulfan 21679-14-1, Fludarabine 140608-64-6, OKT-3
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

RE.CNT 16 THERE ARE 16 CITED REFERENCES AVAILABLE FOR THIS RECORD

RE

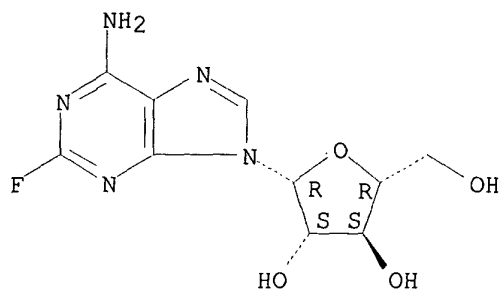
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IT **21679-14-1, Fludarabine**
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(HLA-haploidentical blood progenitor cell transplantation in osteopetrosis)

RN 21679-14-1 HCAPLUS

CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



L77 ANSWER 2 OF 13 HCAPLUS COPYRIGHT 2002 ACS

AN 2002:198998 HCAPLUS

DN 136:353549

TI A cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation

AU Kean, Leslie S.; Durham, Megan M.; Adams, Andrew B.; Hsu, Lewis L.; Perry, Jennifer R.; Dillehay, Dirck; Pearson, Thomas C.; **Waller, Edmund K.**; Larsen, Christian P.; Archer, David R.

CS Division of Hematology, Oncology Blood and Marrow Transplantation, Department of Pediatrics, Emory University School of Medicine, Atlanta, GA, 30322, USA

SO Blood (2002), 99(5), 1840-1849

CODEN: BLOOAW; ISSN: 0006-4971

PB American Society of Hematology

DT Journal

LA English

CC 14-6 (Mammalian Pathological Biochemistry)

AB The morbidity and mortality assocd. with sickle cell disease (SCD) is caused by hemolytic anemia, vaso-occlusion, and progressive multiorgan damage. Bone marrow transplantation (BMT) is currently the only curative therapy; however, toxic myeloablative preconditioning and barriers to allotransplantation limit this therapy to children with major SCD complications and HLA-matched donors. In trials of myeloablative BMT designed to yield total marrow replacement with donor stem cells, a subset of patients developed mixed chimerism. Importantly, these patients showed resoln. of SCD complications. This implies that less toxic preparative regimens, purposefully yielding mixed chimerism after transplantation, may be sufficient to cure SCD without the risks of myeloablation. To rigorously test this hypothesis, we used a murine model for SCD to investigate whether nonmyeloablative preconditioning coupled with tolerance induction could intentionally create mixed chimerism and a clin. cure. We applied a well-tolerated, nonirradn.-based, allogeneic transplantation protocol using nonmyeloablative preconditioning (low-dose busulfan) and costimulation blockade (CTLA4-lg and anti-CD40L) to produce mixed chimerism and transplantation tolerance to fully major histocompatibility complex-mismatched donor marrow. Chimeric mice were phenotypically cured of SCD and had normal RBC morphol. and hematol. indexes (Hb, hematocrit, reticulocyte, and white blood cell counts) without evidence of graft vs. host disease. Importantly, they also showed normalization of characteristic spleen and kidney pathol. These expts. demonstrate the ability to produce a phenotypic cure for murine SCD using a nonmyeloablative protocol with fully histocompatibility complex-mismatched donors. They suggest a future treatment strategy for human SCD patients that reduces the toxicity of conventional BMT and expands the use of allotransplantation to non-HLA-matched donors.

ST sickle cell disease mixed chimerism MHC bone marrow transplantation

IT Histocompatibility antigens

- RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (MHC (major histocompatibility complex); cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)
- IT **Transplant and Transplantation**
 (bone marrow; cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)
- IT Erythrocyte
 Hematocrit
Immune tolerance
 Kidney
 Leukocyte
 Reticulocyte
 Sickle cell anemia
 Spleen
 (cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)
- IT Hemoglobins
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)
- IT Bone marrow
 (replacement; cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)
- IT **Hematopoietic precursor cell**
 (stem; cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)
- IT Bone marrow
 (transplant; cure for murine sickle cell disease through stable mixed chimerism and tolerance induction after nonmyeloablative conditioning and major histocompatibility complex-mismatched bone marrow transplantation)

RE.CNT 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS RECORD

RE

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L77 ANSWER 3 OF 13 HCAPLUS COPYRIGHT 2002 ACS

AN 2002:102657 HCAPLUS

DN 136:272843

TI Limiting transplantation-related mortality following unrelated donor stem cell transplantation by using a nonmyeloablative conditioning regimen

AU Chakraverty, Ronjon; Peggs, Karl; Chopra, Rajesh; Milligan, Donald W.; Kottaridis, Panagiotis D.; Verfuether, Stephanie; Geary, Johanne; Thuraisundaram, Dharsha; Branson, Kate; Chakrabarti, Suparno; Mahendra, Premini; Craddock, Charles; Parker, Anne; Hunter, Ann; Hale, Geoff; Waldmann, Herman; Williams, Catherine D.; Yong, Kwee; Linch, David C.; Goldstone, Anthony H.; MacKinnon, Stephen

CS Department of Haematology, University College London Hospital, London, WC1E 6HX, UK

SO Blood (2002), 99(3), 1071-1078

CODEN: BLOOAW; ISSN: 0006-4971

PB American Society of Hematology

DT Journal

LA English

CC 1-6 (Pharmacology)

Section cross-reference(s): 15

AB A nonmyeloablative conditioning regimen was investigated in 47 patients with hematol. malignancy receiving **allogeneic** progenitor cells from matched, unrelated donors. The median patient age was 44 yr. The majority of patients had high-risk features, including having failed a prior transplantation (29 individuals). Twenty of the transplants were mismatched for HLA class I and/or class II alleles. Recipient conditioning consisted of 20 mg CAMPATH-1H on days -8 to -4, 30 mg/m² **fludarabine** on days -7 to -3, and 140 mg/m² melphalan on day -2. **Graft-vs.-host disease (GVHD)** prophylaxis was with cyclosporine A alone. Primary **graft** failure occurred in only 2 of 44 evaluable patients (4.5%). Chimerism studies in 34 patients indicated that the majority (85.3%) attained initial full donor chimerism. Only 3 patients developed grade III to IV acute **GVHD**, and no patients have yet developed chronic extensive **GVHD**. The estd. probability of nonrelapse mortality at day 100 was 14.9% (95% confidence interval [CI], 4.7%-25.1%). With a median follow-up of 344 days (range, 79-830), overall and progression-free survivals at 1 yr were 75.5% (95% CI, 62.8%-88.2%) and 61.5% (95% CI,

- 46.1%-76.8%), resp. In summary, a nonmyeloablative regimen incorporating in vivo CAMPATH-1H is effective in promoting durable engraftment in most patients and in reducing the risk of severe GVHD following matched unrelated donor transplantation.
- ST CAMPATH1H nonmyeloablative antitumor stem cell transplant hematol malignancy; unrelated donor nonmyeloablative conditioning MAb stem cell transplant rejection
- IT Human
(CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Histocompatibility antigens
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(HLA-A; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Histocompatibility antigens
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(HLA-B; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Histocompatibility antigens
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(HLA-C; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Gene, animal
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(HLA-DQB1, antigen; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Gene, animal
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(HLA-DRB1, antigen; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT **Transplant and Transplantation**
(allotransplant, bone marrow; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Bone marrow
(allotransplant; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT **Transplant and Transplantation**
(graft-vs.-host reaction; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Antitumor agents
(hematol., CAMPATH-1H; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT Neoplasm
(hematol.; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT **Cytomegalovirus**
(infection reactivation; CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT 148-82-3, Melphalan 21679-14-1, Fludarabine 59865-13-3, Cyclosporine A 216503-57-0
RL: ADV (Adverse effect, including toxicity); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)
- IT 100-33-4, Pentamidine 8064-90-2, Cotrimoxazole 59277-89-3, Acyclovir 82410-32-0, Ganciclovir 84625-61-6, Itraconazole 86386-73-4, Fluconazole
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)

RE.CNT 35 THERE ARE 35 CITED REFERENCES AVAILABLE FOR THIS RECORD
RE

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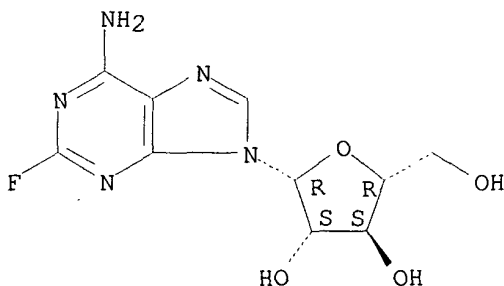
IT 21679-14-1, Fludarabine

RL: ADV (Adverse effect, including toxicity); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(CAMPATH-1H nonmyeloablative conditioning regimen for stem cell transplantation in patients with hematol. malignancy)

RN 21679-14-1 HCAPLUS

CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



- L77 ANSWER 4 OF 13 HCAPLUS COPYRIGHT 2002 ACS
 AN 2002:67591 HCAPLUS
 DN 136:256859
 TI Nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells for hematologic malignancies in patients with **acquired immunodeficiency syndrome**
 AU Kang, Elizabeth M.; De Witte, Moniek; Malech, Harry; Morgan, Richard A.; Phang, Sheila; Carter, Charles; Leitman, Susan F.; Childs, Richard; Barrett, A. John; Little, Richard; Tisdale, John F.
 CS Molecular and Clinical Hematology Branch, National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health, Bethesda, MD, 20892, USA
 SO Blood (2002), 99(2), 698-701
 CODEN: BLOOAW; ISSN: 0006-4971
 PB American Society of Hematology
 DT Journal
 LA English
 CC 1-6 (Pharmacology)
 Section cross-reference(s): 15
 AB To assess the safety and efficacy of nonmyeloablative **allogeneic** transplantation in patients with **HIV** infection, a clin. protocol was initiated in patients with refractory hematol. malignancies and concomitant **HIV** infection. The results from the first 2 patients are reported. The indications for transplantation were treatment-related acute myelogenous leukemia and primary refractory Hodgkin disease in patients 1 and 2, resp. Only patient 1 received genetically modified cells. Both patients tolerated the procedure well with minimal toxicity, and complete remissions were achieved in both patients, but patient 2 died of relapsed Hodgkin disease 12 mo after transplantation. Patient 1 continues in complete remission with undetectable **HIV** levels and rising CD4 counts, and with both the therapeutic and control gene transfer vectors remaining detectable at low levels more than 2 yr after transplantation. These results suggest that nonmyeloablative **allogeneic** transplantation in the context of highly active antiretroviral therapy is feasible in patients with treatment-sensitive **HIV** infection.
 ST **HIV AIDS** leukemia Hodgkin's CMV toxoplasmosis therapy; **hematopoietic** stem cell transplant **HIV** antiviral immunosuppressant antitumor
 IT Histocompatibility antigens
 RL: BSU (Biological study, unclassified); BIOL (Biological study) (HLA; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
 IT Antitumor agents (Hodgkin's disease inhibitors; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
 IT Antitumor agents (acute myelogenous leukemia; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
 IT Leukemia (acute myelogenous; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
 IT **Transplant and Transplantation** (**allotransplant**, bone marrow; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)

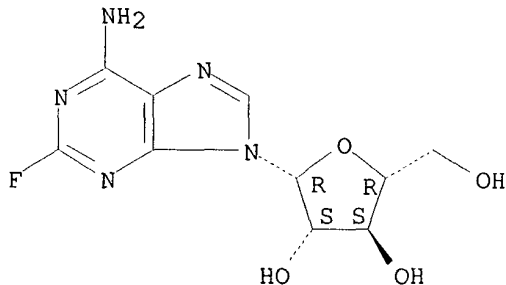
- IT Bone marrow
(**allotransplant**; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT **Transplant and Transplantation**
(**graft-vs.-host** reaction; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT **AIDS** (disease)
Anti-**AIDS** agents
Antibiotics
Antiviral agents
CD4-positive **T cell**
Cytomegalovirus
Hodgkin's disease
Human
Immunosuppressants
(hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT Interferons
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT Hodgkin's disease
(inhibitors; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT **Hematopoietic precursor cell**
(stem; hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT Toxoplasma gondii
(toxoplasmosis from; hematol. malignancies in patients with **acquired immunodeficiency syndrome**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)
- IT 50-18-0, Cyclophosphamide 53-03-2, Prednisone 3056-17-5, Stavudine 8064-90-2, Bactrim 21679-14-1, **Fludarabine** 59277-89-3, Acyclovir 70458-96-7, Norfloxacin 79217-60-0, Cyclosporin 82410-32-0, Ganciclovir 134678-17-4, Lamivudine 136470-78-5, Abacavir 150378-17-9, Indinavir 159989-64-7, Nelfinavir
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(hematol. malignancies in patients with **AIDS**: nonmyeloablative conditioning followed by transplantation of genetically modified HLA-matched peripheral blood progenitor cells)

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- IT **21679-14-1, Fludarabine**
 RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL
 (Biological study); USES (Uses)
 (hematol. malignancies in patients with **AIDS**:
 nonmyeloablative conditioning followed by transplantation of
 genetically modified HLA-matched peripheral blood progenitor cells)
- RN 21679-14-1 HCAPLUS
 CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX
 NAME)

Absolute stereochemistry.



- L77 ANSWER 5 OF 13 HCAPLUS COPYRIGHT 2002 ACS
 AN 2001:880342 HCAPLUS
 DN 136:161053
 TI Durable engraftment of major histocompatibility complex-incompatible cells
 after nonmyeloablative conditioning with **fludarabine**, low-dose
 total body irradiation, and posttransplantation cyclophosphamide
 AU Luznik, Leo; Jalla, Sanju; Engstrom, Laura W.; Iannone, Robert; Fuchs,
 Ephraim J.
 CS Divisions of Hematopoiesis/Immunology, Hematologic Malignancies, Johns
 Hopkins Oncology Center, Baltimore, MD, USA
 SO Blood (2001), 98(12), 3456-3464
 CODEN: BLOOAW; ISSN: 0006-4971
 PB American Society of Hematology
 DT Journal
 LA English
 CC 1-7 (Pharmacology)
 Section cross-reference(s): 15
 AB Treatment of leukemia by myeloablative conditioning and transplantation of
 major histocompatibility complex (MHC)-mismatched stem cells is generally

avoided because of the high risk of **graft rejection** or lethal **graft-vs.-host disease (GVHD)**. This study shows that MHC-incompatible cells can engraft stably after nonmyeloablative conditioning with immunosuppressive chemotherapy and low-dose total body irradiation (TBI). Long-term mixed **hematopoietic** chimerism, clonal deletion of donor-reactive **T cells**, and bidirectional cytotoxic **T-cell** tolerance were achieved by transplanting MHC-mismatched marrow cells into recipients conditioned with pretransplantation **fludarabine** or cyclophosphamide (Cy), 50 to 200 cGy TBI on day -1, and Cy 200 mg/kg i.p. on day 3. In this model, long-term donor chimerism was proportional to the dose of TBI or donor marrow cells. Pretransplantation **fludarabine** and posttransplantation Cy were both required for alloengraftment, but the drugs had additional effects. For example, **fludarabine** sensitized **host** stem cells to the toxicity of TBI, because animals conditioned with both agents had higher chimerism than animals conditioned with TBI alone ($P < .05$). Also, post-transplantation Cy attenuated lethal and nonlethal GVH reactions, because F1 recipients of **host**-reactive, parental spleen cells survived longer ($P < .05$) and had lower donor cell chimerism ($P < .01$) if they received posttransplantation Cy than if they did not. Finally, delayed infusions of donor **lymphocytes** into mixed chimeras prolonged survival after leukemia challenge ($P < .0001$) without causing lethal **GVHD**. These results indicate that stable engraftment of MHC-incompatible cells can be induced after **fludarabine**-based, nonmyeloablative conditioning and that it serves as a platform for adoptive immunotherapy with donor **lymphocyte** infusions.

- ST leukemia myeloablation stem cell transplant immunosuppressant radiation
IT Histocompatibility antigens
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(MHC (major histocompatibility complex); durable engraftment of major histocompatibility complex-incompatible cells after nonmyeloablative conditioning with **fludarabine**, low-dose total body irradiation, and posttransplantation cyclophosphamide)
- IT Adoptive immunotherapy
Immunosuppressants
Ionizing radiation
Leukemia
Transplant and Transplantation
Transplant rejection
(durable engraftment of major histocompatibility complex-incompatible cells after nonmyeloablative conditioning with **fludarabine**, low-dose total body irradiation, and posttransplantation cyclophosphamide)
- IT Transplant and Transplantation
(**graft-vs.-host** reaction; durable engraftment of major histocompatibility complex-incompatible cells after nonmyeloablative conditioning with **fludarabine**, low-dose total body irradiation, and posttransplantation cyclophosphamide)
- IT Hematopoietic precursor cell
(stem; durable engraftment of major histocompatibility complex-incompatible cells after nonmyeloablative conditioning with **fludarabine**, low-dose total body irradiation, and posttransplantation cyclophosphamide)
- IT 50-18-0, Cyclophosphamide **21679-14-1**, **Fludarabine**
RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(durable engraftment of major histocompatibility complex-incompatible cells after nonmyeloablative conditioning with **fludarabine**, low-dose total body irradiation, and posttransplantation cyclophosphamide)

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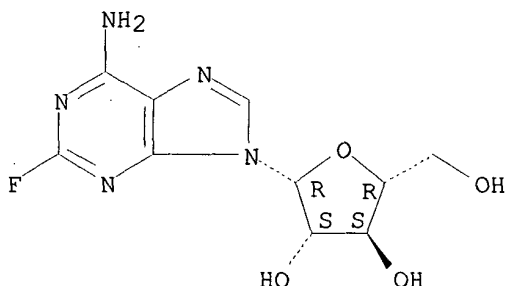
IT 21679-14-1, Fludarabine

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL
(Biological study); USES (Uses)

(durable engraftment of major histocompatibility complex-incompatible
cells after nonmyeloablative conditioning with **fludarabine**,
low-dose total body irradiation, and posttransplantation cyclophosphamide)

RN 21679-14-1 HCAPLUS
 CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



L77 ANSWER 6 OF 13 HCAPLUS COPYRIGHT 2002 ACS
 AN 2001:880308 HCAPLUS
 DN 136:165781
 TI The effect of pretransplant interferon therapy on the outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase
 AU Lee, Stephanie J.; Klein, John P.; Anasetti, Claudio; Antin, Joseph H.; Loberiza, Fausto R.; Bolwell, Brian J.; LeMaistre, Charles F.; Litzow, Mark R.; Marks, David; **Waller, Edmund K.**; Matlack, Marie; Giralt, Sergio; Horowitz, Mary M.
 CS Chronic Leukemia Working Committee of the International Bone Marrow Transplant Registry, Health Policy Institute, Medical College of Wisconsin, Milwaukee, WI, 53226, USA
 SO Blood (2001), 98(12), 3205-3211
 CODEN: BLOOAW; ISSN: 0006-4971
 PB American Society of Hematology
 DT Journal
 LA English
 CC 15-5 (Immunochemistry)
 AB Various therapeutic options are available for patients with chronic myelogenous leukemia. Allogeneic stem cell transplantation, though often curative, is assocd. with high nonrelapse mortality and long-term morbidity, particularly when cells from unrelated donors are used. Many physicians and patients opt for a trial of interferon-.alpha. (IFN)-based therapy first, reserving transplantation for patients with inadequate response or intolerance to IFN. Data were analyzed on 740 patients receiving unrelated donor transplants for chronic myelogenous leukemia in first chronic phase provided by the International Bone Marrow Transplant Registry and the National Marrow Donor Program to see whether IFN pretreatment compromised transplantation outcome. A total of 489 (66%) had received IFN prior to transplantation; 251 (34%) had not. Disease characteristics in the 2 groups were similar at diagnosis but at the time of transplantation, hematol. parameters and wt. were lower in IFN patients and the interval between diagnosis and transplantation was longer. After adjustment for baseline covariates, no effect of IFN exposure was found on overall survival, leukemia-free survival, nonrelapse mortality, engraftment, relapse, or acute or chronic graft-vs.-host disease. Evaluation of effects based on duration of therapy and time off IFN prior to transplantation was limited by missing data and confounding with IFN intolerance and disease responsiveness. In conclusion, no evidence was found for an independent adverse effect of IFN pretreatment on the outcome of subsequent unrelated donor transplantation.
 ST interferon allogeneic stem cell transplant myelogenous leukemia

- IT **Transplant and Transplantation**
(allotransplant; effect of pretransplant interferon therapy on outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase)
- IT **Antitumor agents**
(chronic myelocytic leukemia; effect of pretransplant interferon therapy on outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase)
- IT **Human**
(effect of pretransplant interferon therapy on outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase)
- IT **Interferons**
RL: ADV (Adverse effect, including toxicity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(effect of pretransplant interferon therapy on outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase)
- IT **Transplant and Transplantation**
(graft-vs.-host reaction; effect of pretransplant interferon therapy on outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase)
- IT **Hematopoietic precursor cell**
(stem; effect of pretransplant interferon therapy on outcome of unrelated donor hematopoietic stem cell transplantation for patients with chronic myelogenous leukemia in first chronic phase)

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L77 ANSWER 7 OF 13 HCAPLUS COPYRIGHT 2002 ACS
 AN 2001:647544 HCAPLUS
 DN 135:352467
 TI Dose-reduced conditioning and **allogeneic hematopoietic**
 stem cell transplantation from unrelated donors in 42 patients
 AU Bornhauser, Martin; Thiede, Christian; Platzbecker, Uwe; Jenke, Andreas;
 Helwig, Anett; Plettig, Runa; Freiberg-Richter, Jens; Rollik, Christoph;
 Geissler, Gabriele; Lutterbeck, Karin; Oelschlagel, Uta; Ehninger, Gerhard
 CS Medizinische Klinik und Poliklinik I, Universitätsklinikum Carl Gustav
 Carus, Dresden, 01307, Germany
 SO Clinical Cancer Research (2001), 7(8), 2254-2262
 CODEN: CCREF4; ISSN: 1078-0432
 PB American Association for Cancer Research
 DT Journal
 LA English
 CC 1-6 (Pharmacology)
 Section cross-reference(s): 15
 AB A **fludarabine**-based "nonmyeloablative" preparative regimen was
 investigated in 42 patients with hematol. malignancies receiving
hematopoietic stem cell grafts from unrelated
 volunteer donors. Recipient conditioning consisted of **fludarabine**
 30 mg/m² on days -6 to -2 and i.v. busulfan 3.3 mg/kg on days -6 to -5.
 Antithymocyte globulin was added at 2.5 mg/kg i.v. on days -5 to -2. The
 patients were grafted with bone marrow (n = 13) or peripheral blood stem
 cells either unmanipulated (n = 20) or CD34+ selected (n = 9).
Graft-vs.-host disease prophylaxis was
 performed with cyclosporine A (CsA, n = 12), CsA/methotrexate (n = 12), or
 CsA/mycophenolate mofetil (n = 18). With a median follow-up of 13 mo
 (range, 5-26 mo), the actuarial **disease**-free survival is 64% and
 38% for patients with lymphoid malignancies and std.-risk leukemia
 compared with only 14% for patients with high-risk **disease**. The
 main cause of treatment failure was relapse of **disease** in
 high-risk patients (n = 14). An increased incidence of primary (n = 1) or
 secondary **graft**-failure (n = 8) was obsd. (21%). Chimerism
 anal. of CD56+/CD3--sorted **natural killer** (NK)
cells, available in 10 patients, showed an impaired increase of
 donor NK **cell** chimerism between day 10 and 30 after
 transplantation in three of four patients with **graft** failure,
 whereas the percentage of donor NK **cells** surpassed 75% in all of
 the six patients with stable engraftment. Unrelated transplants after
 dose-reduced conditioning are assocd. with a higher risk of **graft**
 -failure. Pretransplant **host** immunosuppression has to be
 optimized to overcome resistance to **grafts** from unrelated donors
 after nonmyeloablative conditioning therapy.
 ST antileukemic immunosuppressant unrelated **allogeneic** transplant
 graft disease
 IT **Transplant and Transplantation**
 (allotransplant; dose-reduced conditioning and
allogeneic hematopoietic stem cell transplantation
 from unrelated donors in humans)
 IT Immunoglobulins
 RL: BAC (Biological activity or effector, except adverse); BSU (Biological
 study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES
 (Uses)
 (antithymocyte globulins; dose-reduced conditioning and
allogeneic hematopoietic stem cell transplantation
 from unrelated donors in humans)
 IT **Immunosuppressants**
 (dose-reduced conditioning and **allogeneic**
hematopoietic stem cell transplantation from unrelated donors
 in humans)
 IT Chimeric gene
 RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL

(Biological study); PROC (Process)
 (dose-reduced conditioning and **allogeneic**
hematopoietic stem cell transplantation from unrelated donors
 in humans)

IT **Transplant and Transplantation**

(graft-vs.-host reaction; dose-reduced conditioning
 and **allogeneic hematopoietic** stem cell
 transplantation from unrelated donors in humans)

IT Antitumor agents

(leukemia; dose-reduced conditioning and **allogeneic**
hematopoietic stem cell transplantation from unrelated donors
 in humans)

IT **Hematopoietic precursor cell**

(stem; dose-reduced conditioning and **allogeneic**
hematopoietic stem cell transplantation from unrelated donors
 in humans)

IT 55-98-1, Busulfan 59-05-2, Methotrexate 21679-14-1,
Fludarabine 59865-13-3, Cyclosporine A 128794-94-5,
 Mycophenolate mofetil

RL: ADV (Adverse effect, including toxicity); BAC (Biological activity or
 effector, except adverse); BSU (Biological study, unclassified); THU
 (Therapeutic use); BIOL (Biological study); USES (Uses)

(dose-reduced conditioning and **allogeneic**
hematopoietic stem cell transplantation from unrelated donors
 in humans)

RE.CNT 32 THERE ARE 32 CITED REFERENCES AVAILABLE FOR THIS RECORD
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IT 21679-14-1, **Fludarabine**

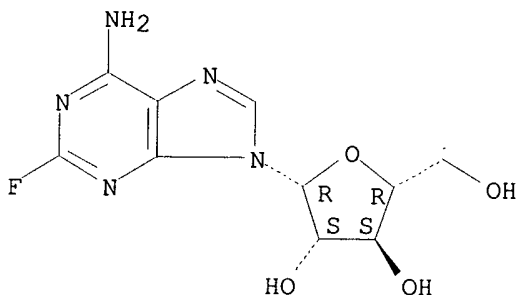
RL: ADV (Adverse effect, including toxicity); BAC (Biological activity or
 effector, except adverse); BSU (Biological study, unclassified); THU
 (Therapeutic use); BIOL (Biological study); USES (Uses)

(dose-reduced conditioning and **allogeneic**
hematopoietic stem cell transplantation from unrelated donors
 in humans)

RN 21679-14-1 HCAPLUS

CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX
 NAME)

Absolute stereochemistry.



L77 ANSWER 8 OF 13 HCAPLUS COPYRIGHT 2002 ACS

AN 2001:549793 HCAPLUS

DN 135:327107

TI Nonmyeloablative **hematopoietic** cell transplantation: Replacing
 high-dose cytotoxic therapy by the graft-versus-tumor effect

AU Feinstein, Lyle; Sandmaier, Brenda; Maloney, David; McSweeney, Peter A.;
 Maris, Michael; Flowers, Christopher; Radich, Jerry; Little, Marie-Tereese;
 Nash, Richard A.; Chauncey, Thomas; Woolfrey, Ann; Georges, George; Kiem,
 Hans-Peter; Zaucha, Jan M.; Blume, Karl G.; Shizuru, Judith; Niederwieser,
 Dietger; Storb, Rainer

CS Fred Hutchinson Cancer Research Center, Seattle, WA, 98109-1024, USA

SO Annals of the New York Academy of Sciences (2001), 938(Hematopoietic Stem
 Cells 2000), 328-339

CODEN: ANYAA9; ISSN: 0077-8923

PB New York Academy of Sciences

DT Journal

LA English

CC 1-7 (Pharmacology)

Section cross-reference(s): 8

AB Conventional allografting produces considerable regimen-related toxicities
 that generally limit this treatment to patients younger than 55 yr and in
 otherwise good medical condition. **T cell**-mediated
graft-vs.-tumor (GVT) effects are known to play an important role
 in the elimination of malignant **disease** after
allografts. A minimally myelosuppressive regimen that
 relies on immunosuppression for **allogeneic** engraftment was
 developed to reduce toxicities while optimizing GVT effects.
 Pre-transplant total-body irradiation (200 cGy) followed by post-transplant
 immunosuppression with cyclosporine (CSP) and mycophenolate mofetil (MMF)
 permitted human leukocyte antigen (HLA)-matched sibling donor
hematopoietic cell engraftment in 82% of patients (n = 55) without
 prior high-dose therapy. The addition of **fludarabine** (90 mg/M2)
 facilitated engraftment in all 28 subsequent patients. Overall, fatal
 progression of underlying **disease** occurred in 20% of patients
 after transplant. Non-relapse mortality occurred in 11% of patients.
 Toxicities were low. Grade 2-4 acute **graft-vs.-host**
disease (GVHD) associated with primary engraftment
 developed in 47% of patients, and was readily controlled in all but two
 patients. Donor **lymphocyte** infusions (DLI) were not very
 effective at converting a low degree of mixed donor/**host**

chimerism to full donor chimerism; however, the addn. of **fludarabine** reduced the need for DLI. With a median follow-up of 244 days, 68% of patients were alive, with 42% of patients in complete remission, including mol. remissions. Remissions occurred gradually over periods of weeks to a year. If long-term efficacy is demonstrated, such a strategy would expand treatment options for patients who would otherwise be excluded from conventional allografting.

- ST nonmyeloablative **hematopoietic** cell transplantation
immunosuppressant antitumor
 - IT Histocompatibility antigens
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(HLA; nonmyeloablative **hematopoietic** cell transplantation
relying on immunosuppression for treatment of hematol. malignancies in humans)
 - IT **Transplant and Transplantation**
(allotransplant, **hematopoietic** stem cell;
nonmyeloablative **hematopoietic** cell transplantation relying
on immunosuppression for treatment of hematol. malignancies in humans)
 - IT **Transplant and Transplantation**
(bone marrow; nonmyeloablative **hematopoietic** cell
transplantation relying on immunosuppression for treatment of hematol.
malignancies in humans)
 - IT **Transplant and Transplantation**
(graft-vs.-host reaction; nonmyeloablative
hematopoietic cell transplantation relying on immunosuppression
for treatment of hematol. malignancies in humans)
 - IT Antitumor agents
(hematol. malignancy; nonmyeloablative **hematopoietic** cell
transplantation relying on immunosuppression for treatment of hematol.
malignancies in humans)
 - IT Neoplasm
(hematol.; nonmyeloablative **hematopoietic** cell
transplantation relying on immunosuppression for treatment of hematol.
malignancies in humans)
 - IT Lymphocyte
(infusion; nonmyeloablative **hematopoietic** cell
transplantation relying on immunosuppression for treatment of hematol.
malignancies in humans)
 - IT **Hematopoietic precursor cell**
Immunosuppressants
Radiotherapy
(nonmyeloablative **hematopoietic** cell transplantation relying
on immunosuppression for treatment of hematol. malignancies in humans)
 - IT Bone marrow
(transplant; nonmyeloablative **hematopoietic** cell
transplantation relying on immunosuppression for treatment of hematol.
malignancies in humans)
 - IT **21679-14-1, Fludarabine** 59865-13-3, Cyclosporine
128794-94-5, Mycophenolate mofetil
RL: BAC (Biological activity or effector, except adverse); BSU (Biological
study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES
(Uses)
(nonmyeloablative **hematopoietic** cell transplantation relying
on immunosuppression for treatment of hematol. malignancies in humans)
- RE.CNT 59 THERE ARE 59 CITED REFERENCES AVAILABLE FOR THIS RECORD
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IT 21679-14-1, Fludarabine

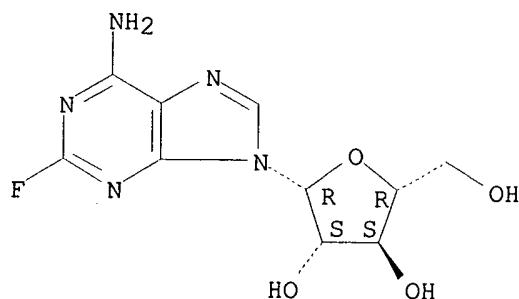
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(nonmyeloablative **hematopoietic** cell transplantation relying on immunosuppression for treatment of hematol. malignancies in humans)

RN 21679-14-1 HCAPLUS

CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



L77 ANSWER 9 OF 13 HCAPLUS COPYRIGHT 2002 ACS
 AN 2000:475773 HCAPLUS
 DN 133:84267
 TI Non-myeloablative tolerogenic treatment
 IN Slavin, Shimon; Prigozhina, Tatyana
 PA Hadasit Medical Research Services and Development Ltd., Israel; Baxter International Inc.
 SO PCT Int. Appl., 119 pp.
 CODEN: PIXXD2

DT Patent
 LA English
 IC ICM C12N005-08
 ICS A61K035-12; A61K035-28; A61K039-00; A61P037-02
 CC 1-7 (Pharmacology)
 Section cross-reference(s): 15

FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	WO 2000040701	A2	20000713	WO 1999-US30704	19991223
	WO 2000040701	A3	20001221		
	W: CA, IL, JP, MX				
	RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
EP	1141246	A2	20011010	EP 1999-968946	19991223
	R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
PRAI	US 1998-222011	A	19981231		
	WO 1999-US30704	W	19991223		

AB The present invention features a method of inducing donor-specific tolerance in a host. Tolerogenic treatments of the present invention may be administered to a host prior to transplantation of donor-derived materials. The tolerogenic treatment involves (1) administering an immunosuppressive agent to a host mammal in a non-myeloablative regimen sufficient to decrease, but not necessarily to eliminate, the host mammal's functional **T lymphocyte** population; (2) infusing donor antigens from a non-syngeneic donor into the host mammal; (3) eliminating those host **T lymphocytes** responding to the infused donor antigens using a non-myeloablative dose of **lymphocytotoxic** or tolerizing agent; and (4) administering donor **hematopoietic** cells to the host mammal. Donor lymphoid cells used for cell therapy of a host mammal can be depleted of host specific immunol. reactivity by methods essentially similar to those used for tolerizing a host mammal prior to transplantation.

ST immune tolerance induction donor antigen immunosuppressant; **T lymphocyte** elimination immunosuppressant immune tolerance; transplantation immune tolerance induction immunosuppressant

IT **Transplant and Transplantation**
Transplant and Transplantation

- (bone marrow, induction of immune tolerance to recipient in, **graft-vs.-host disease** prevention in relation to; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Antigens**
 RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (donor; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Transplant and Transplantation**
 (**graft-vs.-host** reaction, prevention of by immune tolerance induction; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **T cell (lymphocyte)**
 (immune tolerance induction in; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Leukemia**
Neoplasm
 (immunotherapy of, immune tolerance induction to prevent **graft-vs.-host disease** in; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Immune tolerance**
Immunosuppressants
Transplant and Transplantation
Transplant rejection
 (non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Immunotherapy**
 (of leukemia, immune tolerance induction to prevent **graft-vs.-host disease** in; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Cytokines**
 Interleukin 10
 Interleukin 2
 Tumor necrosis factors
 RL: BPR (Biological process); BSU (Biological study, unclassified); PRP (Properties); BIOL (Biological study); PROC (Process)
 (prodn. in immunotherapy of leukemia, **graft-vs.-host disease** prevention in relation to; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Hematopoietic precursor cell**
 (stem, in immune tolerance induction; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Antibodies**
 RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (to **T lymphocytes**, in immune tolerance induction; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)
- IT **Bone marrow**
Bone marrow
 (transplant, induction of immune tolerance to recipient in, **graft-vs.-host disease** prevention in relation to; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)

IT Radiotherapy
(x-ray, T lymphocyte depletion with, in immune tolerance induction; non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)

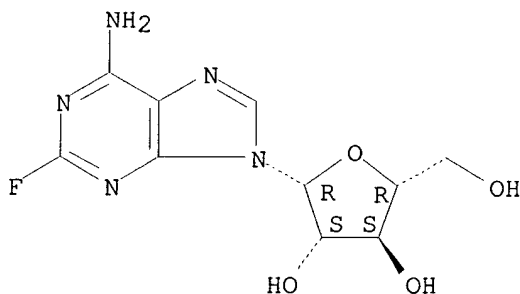
IT 50-18-0, Cyclophosphamide **21679-14-1, Fludarabine**
88859-04-5
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)

IT **21679-14-1, Fludarabine**
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(non-myeloablative induction of tolerance using donor antigens and immunosuppressants to prevent transplantation rejection)

RN 21679-14-1 HCAPLUS

CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



L77 ANSWER 10 OF 13 HCAPLUS COPYRIGHT 2002 ACS

AN 2000:335523 HCAPLUS

DN 132:303515

TI Method and compositions for improving allogeneic hematopoietic cell transplantation

IN Waller, Edmund K.

PA Emory University, USA

SO PCT Int. Appl., 22 pp.

CODEN: PIXXD2

DT Patent

LA English

IC ICM C12N005-00

CC 1-12 (Pharmacology)

FAN.CNT 1

	PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
PI	WO 2000027998	A2	20000518	WO 1999-US26773	19991110
	WO 2000027998	A3	20000727		
W:	AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW:	GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE,				

DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
EP 1123384 A2 20010816 EP 1999-961649 19991110
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
IE, FI

PRAI US 1998-189577 A 19981111
WO 1999-US26773 W 19991110

AB The invention relates to methods of reducing or preventing graft vs. host disease in an allogeneic hematopoietic system reconstituting cells transplant recipient comprising administering to the recipient allogeneic hematopoietic system reconstituting cells in which the no. of dendritic cells has been effectively reduced, thereby reducing or preventing graft vs. host disease, are provided. Also provided are methods of increasing the chance of survival for an allogeneic hematopoietic system reconstituting cells transplant recipient comprising administering to the recipient allogeneic hematopoietic system reconstituting cells in which the no. of dendritic cells has been effectively reduced, thereby improving the chance for survival of the recipient. Columns for prepg. hematopoietic system reconstituting cells prior to their transplantation are disclosed that provide for the selection of CD34+ cells and the removal of dendritic cell progenitors.

ST graft host disease allogeneic hematopoietic cell; interleukin 3 graft host disease

IT CD antigens

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(CD34 or CD36 or CD45RA; method and compns. for improving allogeneic hematopoietic cell transplantation)

IT **Hematopoietic precursor cell**

(allogeneic; method and compns. for improving allogeneic hematopoietic cell transplantation)

IT **Transplant and Transplantation**

(graft-vs.-host reaction; method and compns. for improving allogeneic hematopoietic cell transplantation)

IT **Transplant and Transplantation**

(method and compns. for improving allogeneic hematopoietic cell transplantation)

IT Antibodies

CD4 (antigen)

Interleukin 3

Interleukin 3 receptors

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(method and compns. for improving allogeneic hematopoietic cell transplantation)

L77 ANSWER 11 OF 13 HCAPLUS COPYRIGHT 2002 ACS

AN 1999:344857 HCAPLUS

DN 131:4246

TI Treatment of hematologic disorders

IN Sykes, Megan; Spitzer, Thomas R.

PA The General Hospital Corporation, USA

SO PCT Int. Appl., 60 pp.

CODEN: PIXXD2

DT Patent

LA English

IC ICM A61K035-14

ICS A61K035-28; A61K035-28; A61K039-395; A61K031-675

CC 15-10 (Immunochemistry)

FAN.CNT 1

PATENT NO.

KIND DATE

APPLICATION NO. DATE

PI	WO 9925367	A2	19990527	WO 1998-US24209	19981113
	WO 9925367	A3	19990805		
	W: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE, GH, GM, HR, HU, ID, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
	RW: GH, GM, KE, LS, MW, SD, SZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
	CA 2309919	AA	19990527	CA 1998-2309919	19981113
	EP 1030675	A2	20000830	EP 1998-960199	19981113
	R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
	JP 2001523645	T2	20011127	JP 2000-520800	19981113
	US 2001048921	A1	20011206	US 1998-191970	19981113
PRAI	US 1997-73230P	P	19971114		
	WO 1998-US24209	W	19981113		
AB	<p>The inventors have discovered that hematol. disorders, e.g., both neoplastic (hematol. cancers) and non-neoplastic conditions, can be treated by the induction of mixed chimerism using myeloreductive, but not myeloablative, conditioning. Methods of the invention reduce GVHD, esp. GVHD assocd. with mismatched allogeneic or xenogeneic donor tissue, yet provide, for example, significant graft-vs.-leukemia (GVL) effect and the like. The method comprises administration of myeloreductive treatment (such as immunosuppressant regimen), introduction of allogeneic donor hematopoietic stem cell to form chimeric bone marrow in the recipient, and an immunosuppressant regimen after donor stem cell introduction to prevent graft-vs.-host response. The immunosuppressant regimen includes depletion of host T lymphocytes and/or NK cells by treating with anti-CD4 or CD8 antibodies, anti-thymocyte globulin, anti-lymphoblast globulin, thymic irradiation, and cytoreductive agents (e.g. alkylating agents, alkyl sulfonates, nitrosoureas, triazines, antimetabolites, pyrimidine or purine analogs, vinca alkaloids, epipodophyllotoxins, antibiotics, and others).</p>				
ST	hematol disorder cancer immunosuppressant stem cell transplant				
IT	Histocompatibility antigens				
	RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process) (HLA, class II; immunosuppressant regimen and allogeneic or xenogeneic hematopoietic stem cell transplantation for treatment of hematol. disorders)				
IT	Histocompatibility antigens				
	RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process) (HLA-A; immunosuppressant regimen and allogeneic or xenogeneic hematopoietic stem cell transplantation for treatment of hematol. disorders)				
IT	Histocompatibility antigens				
	RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process) (HLA-B; immunosuppressant regimen and allogeneic or xenogeneic hematopoietic stem cell transplantation for treatment of hematol. disorders)				
IT	Histocompatibility antigens				
	RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process) (HLA-DR; immunosuppressant regimen and allogeneic or xenogeneic hematopoietic stem cell transplantation for treatment of hematol. disorders)				
IT	Histocompatibility antigens				

RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study); PROC (Process)

(HLA; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Erythrocyte

(abnormalities; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Leukemia

(acute myelogenous; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Sulfonates

RL: BSU (Biological study, unclassified); BIOL (Biological study) (alkanesulfonates; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT **Transplant and Transplantation**

(**allotransplant**; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Nutrients

(anti-; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Anemia (disease)

(aplastic; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT **Transplant and Transplantation**

Transplant and Transplantation

(bone marrow; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Cord blood

(cells; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Leukemia

(chronic lymphocytic; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Leukemia

(chronic myelocytic; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT **T cell (lymphocyte)**

(depletion; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Blood

(disease; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

IT Immunity

(disorder, inherited; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

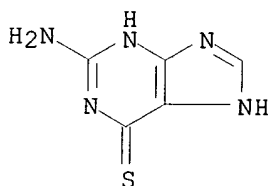
IT **Lymphoblast**

(globulin; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

- IT **Transplant and Transplantation**
(**graft-vs.-host** reaction; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Leukemia
(**graft-vs.-leukemia**; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Lymphoma
(**graft-vs.-lymphoma**; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Neoplasm
(hematol.; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Alkylating agents, biological
Antibiotics
Hodgkin's disease
Immunosuppressants
Multiple myeloma
Myelodysplastic syndromes
Sickle cell anemia
Thalassemia
Thymus gland
(immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT CD4 (antigen)
CD8 (antigen)
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Antibodies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Leukemia
(lymphocytic; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Hemoglobins
RL: ADV (Adverse effect, including toxicity); BSU (Biological study, unclassified); BIOL (Biological study)
(metabolic disorders, hemoglobinopathy; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Antibodies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(monoclonal, OKT3 and LO-CD2a and others; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Lymphocyte
(**natural killer cell**, depletion; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Lymphoma
(non-Hodgkin's; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)

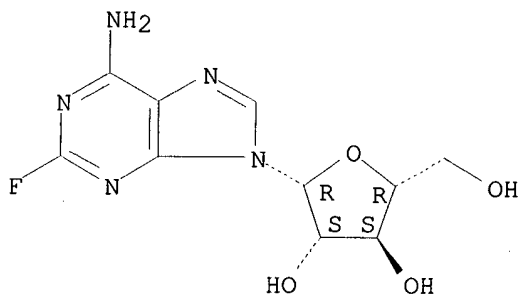
- IT Blood cell
(peripheral; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Chemotherapy
(refractory; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT **Hematopoietic precursor cell**
(stem, transplant; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Radiation
(thymic; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Globulins, biological studies
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(thymocyte or lymphoblast; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Thymus gland
(thymocyte, globulin; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Bone marrow
Bone marrow
Leukocyte
(transplant; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT Alkaloids, biological studies
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(vinca; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT **Transplant and Transplantation**
(xenotransplant; immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT 4375-07-9, Epipodophyllotoxin
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of hematol. disorders)
- IT 50-18-0, Cyclophosphamide 50-76-0, Dactinomycin 51-21-8, Fluorouracil 51-75-2, Mechlorethamine 52-24-4, Thiotepa 55-86-7D, Nitrogen mustard, derivs. 55-93-6, Dimethyl myleran 55-98-1, Busulphan 57-22-7, Vincristine 59-05-2, Methotrexate 59-30-3D, Folic acid, derivs. 120-73-0D, Purine, derivs. 147-94-4, Cytarabine 148-82-3, Melphalan 154-42-7, **Thioguanine** 154-93-8, Carmustine 289-95-2D, Pyrimidine, derivs. 305-03-3, Chlorambucil 488-41-5 865-21-4, Vinblastine 1404-00-8, Mitomycin 4342-03-4, Dacarbazine 11056-06-7, Bleomycin 13010-20-3D, Nitrosourea, derivs. 13010-47-4, Lomustine 13909-09-6, Semustine 15056-34-5D, Triazene, derivs. 18378-89-7, Plicamycin 18883-66-4, Streptozotocin 20830-81-3, Daunorubicin 21679-14-1, **Fludarabine** 23214-92-8, Doxorubicin 29767-20-2, Teniposide 31441-78-8, **Mercaptopurine** 33419-42-0, Etoposide 53643-48-4, Vindesine 58957-92-9, Idarubicin 89149-10-0, Deoxyspergualin
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(immunosuppressant regimen and **allogeneic** or xenogeneic **hematopoietic** stem cell transplantation for treatment of

hematol. disorders)
 IT 154-42-7, Thioguanine 21679-14-1,
 Fludarabine
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (immunosuppressant regimen and **allogeneic** or xenogeneic
hematopoietic stem cell transplantation for treatment of
 hematol. disorders)
 RN 154-42-7 HCAPLUS
 CN 6H-Purine-6-thione, 2-amino-1,7-dihydro- (9CI) (CA INDEX NAME)



RN 21679-14-1 HCAPLUS
 CN 9H-Purin-6-amine, 9-.beta.-D-arabinofuranosyl-2-fluoro- (9CI) (CA INDEX NAME)

Absolute stereochemistry.

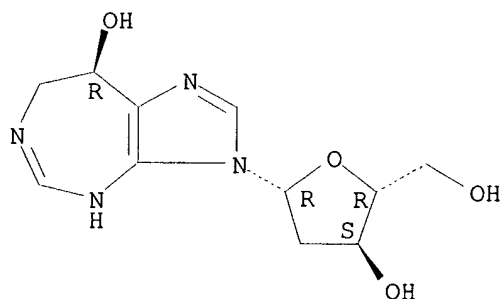


L77 ANSWER 12 OF 13 HCAPLUS COPYRIGHT 2002 ACS
 AN 1986:602908 HCAPLUS
 DN 105:202908
 TI Prevention of **graft-versus-host** disease in
allogeneic bone marrow transplantation by pretreatment with 2'-
deoxycoformycin
 AU Epstein, Joshua; Bealmeear, Patricia M.; Kennedy, David W.; Herrmann,
 Michael J.; Islam, Anwarul; Wiedl, Sheila C.
 CS Dep. Med. Oncol., Roswell Park Mem. Inst., Buffalo, NY, USA
 SO Exp. Hematol. (N. Y.) (1986), 14(9), 845-9
 CODEN: EXHMA6; ISSN: 0301-472X
 DT Journal
 LA English
 CC 1-7 (Pharmacology)
 AB Germ-free mice were used as a model for acute **graft-vs.-**
host disease (GVHD) in **allogeneic** bone marrow
 transplantation (BMT). C3H/He recipients of DBA/2 cells showed typical
 symptoms of acute GVHD and died within 8 days. Incubation of the cells
 with 1 .mu.M 2'-**deoxycoformycin** (2dCF) [53910-25-1]
 (an adenosine deaminase inhibitor) plus 100 .mu.M deoxyadenosine (dAdo)
 [958-09-8] for 1 h inhibited all **T-cell** functions as
 well as **T-cell**-dependent B-cell functions, but had no
 effect on B-cell functions that are **T-cell** independent

nor on the hemopoietic stem cells. Recipients of **allogeneic** cells that had been incubated with 2dCF + dAdo for 1 h prior to inoculation showed no signs, gross or histol., of acute or chronic GVHD up to 15 mo after transplantation. The recovery patterns of the blood and bone marrow were not affected by the treatment and were similar to those of recipients of treated and untreated syngeneic cells.

- ST **graft host disease deoxycoformycin**; bone marrow transplant **deoxycoformycin**
- IT Lymphocyte
(function of, inhibition of, by **deoxycoformycin**, in **graft-vs.-host** reaction prevention)
- IT **Transplant and Transplantation, animal**
(**graft-vs.-host** reaction, in bone marrow transplantation, **deoxycoformycin** inhibition of)
- IT Bone marrow
(transplant, **graft-vs.-host** reaction in, **deoxycoformycin** inhibition of)
- IT 958-09-8
RL: BIOL (Biological study)
(**graft-vs.-host** reaction prevention by **deoxycoformycin** and)
- IT 53910-25-1
RL: BIOL (Biological study)
(**graft-vs.-host** reaction prevention by, in bone marrow transplantation)
- IT 53910-25-1
RL: BIOL (Biological study)
(**graft-vs.-host** reaction prevention by, in bone marrow transplantation)
- RN 53910-25-1 HCAPLUS
- CN Imidazo[4,5-d][1,3]diazepin-8-ol, 3-(2-deoxy-.beta.-D-erythro-pentofuranosyl)-3,4,7,8-tetrahydro-, (8R)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



- L77 ANSWER 13 OF 13 HCAPLUS COPYRIGHT 2002 ACS
- AN 1985:481417 HCAPLUS
- DN 103:81417
- TI Inhibition of adenosine deaminase and purine nucleoside phosphorylase and **T-cell** function in germfree mice and human peripheral blood
- AU Wiedl, Sheila C.; Bealmear, Patricia M.; Epstein, Joshua
- CS Dep. Dermatol., Roswell Park Mem. Inst., Buffalo, NY, 14263, USA
- SO Prog. Clin. Biol. Res. (1985), 181(Germfree Res.), 461-6
CODEN: PCBRD2; ISSN: 0361-7742
- DT Journal
- LA English
- CC 1-7 (Pharmacology)
- AB Germ-free mice irradiated and given **allogeneic** bone marrow

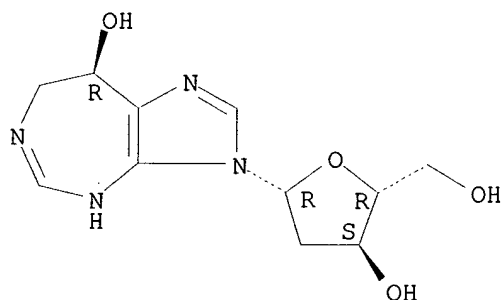
transplants died after 8 days; however, 80% of the animals that received transplants treated with the adenosine deaminase [9026-93-1] inhibitor 2'-**deoxycoformycin** [53910-25-1] (in combination with deoxyadenosine [958-09-8]) or the purine nucleoside phosphorylase [9030-21-1] inhibitor 8-aminoguanosine [3868-32-4] (in combination with 2'-deoxyguanosine [961-07-9]) survived for the 15-mo observation period with no gross symptoms of **graft-vs-host** disease.

Spleen cells from the 2'-**deoxycoformycin** group had no adenosine deaminase at 1 h and had regained 55.5% of normal activity by day 8 and 72.6% of normal activity by day 21. In in vitro expts., adenosine deaminase was absent for the entire 84 h culture period in the **deoxycoformycin**-treated cells, whereas pretreatment with 8-aminoguanosine and 2'-deoxyguanosine diminished but did not eliminate adenosine deaminase activity. The mixed lymphocyte reaction was inhibited by 92% by **deoxycoformycin**; in mitogen assays, phytohemagglutinin-, concanavalin A-, and pokeweed mitogen-responding cells were inhibited, but the lysopolysaccharide-responding cells were not inhibited. When human peripheral blood lymphocytes were also pretreated with **deoxycoformycin** and deoxyadenosine for 1 h, both the phytohemagglutinin- and concanavalin A-responding cells were inhibited; adenosine deaminase activity was completely inhibited during the entire 84-h assay period. It appeared that both drug combinations had potential in preventing **graft-vs-host** disease in bone marrow transplant patients.

- ST **T lymphocyte** adenosine deaminase inhibitor; purine nucleoside phosphorylase inhibitor **lymphocyte; graft vs host** disease marrow transplant
- IT Bone marrow, composition
- Spleen, composition
 - (adenosine deaminase of, nucleoside analogs inhibition of, of humans and lab. animals, **T-lymphocyte** response in relation to)
- IT **Transplant and Transplantation, animal**
 - (of bone marrow, **graft-vs-host** disease treatment in, with nucleoside analogs, **T-lymphocytes** of humans and lab. animals response in relation to)
- IT **Lymphocyte**
 - (**T-**, nucleoside analogs effect on function of, adenosine deaminase inhibition in, of humans and lab. animals, bone marrow transplant in relation to)
- IT **Transplant and Transplantation, animal**
 - (**graft-vs.-host** reaction, treatment of, in bone marrow transplant, with nucleoside analogs, **T-lymphocytes** of humans and lab. animals response in relation to)
- IT Bone marrow
 - (transplant, **graft-vs-host** disease treatment in, with nucleoside analogs, **T-lymphocytes** of humans and lab. animals response in relation to)
- IT 961-07-9
 - RL: BIOL (Biological study)
 - (**T-lymphocyte** function response to aminoguanosine and, adenosine deaminase inhibition in relation to, of humans and lab. animals, bone marrow transplant in relation to)
- IT 53910-25-1
 - RL: BIOL (Biological study)
 - (**T-lymphocyte** function response to deoxyadenosine and, adenosine deaminase inhibition in relation to, of humans and lab. animals, bone marrow transplantation in relation to)
- IT 958-09-8
 - RL: BIOL (Biological study)
 - (**T-lymphocyte** function response to **deoxycoformycin** and, adenosine deaminase inhibition in relation

to, of humans and lab. animals, bone marrow transplant in relation to)
IT 3868-32-4
RL: BIOL (Biological study)
(**T-lymphocyte** function response to deoxyguanosine
and, adenosine deaminase inhibition in relation to, of humans and lab.
animals, bone marrow transplantation in relation to)
IT 9030-21-1
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(inhibitor, aminoguanosine as, **T-lymphocyte**
function response to deoxyguanosine and, of humans and lab. animals,
bone marrow transplant in relation to)
IT 9026-93-1
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(inhibitor, **deoxycoformycin** as, **T-**
lymphocyte function response to deoxyadenosine and, of humans
and lab. animals, bone marrow transplant in relation to)
IT 53910-25-1
RL: BIOL (Biological study)
(**T-lymphocyte** function response to deoxyadenosine
and, adenosine deaminase inhibition in relation to, of humans and lab.
animals, bone marrow transplantation in relation to)
RN 53910-25-1 HCAPLUS
CN Imidazo[4,5-d][1,3]diazepin-8-ol, 3-(2-deoxy-.beta.-D-erythro-
pentofuranosyl)-3,4,7,8-tetrahydro-, (8R)- (9CI) (CA INDEX NAME)

Absolute stereochemistry.



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FILE COVERS 1969 TO DATE.

CAS REGISTRY NUMBERS AND CHEMICAL NAMES (CNs) PRESENT
FROM JANUARY 1969 TO DATE.

RECORDS LAST ADDED: 19 June 2002 (20020619/ED)

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L99 ANSWER 1 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.
AN 2002:124851 BIOSIS
DN PREV200200124851
TI Method of allogeneic hematopoietic stem cell transplantation without graft
failure or graft vs. host disease.
AU **Waller, E. K.**
CS Atlanta, Ga. USA
ASSIGNEE: EMORY UNIVERSITY

PI US 5800539 Sept. 1, 1998
SO Official Gazette of the United States Patent and Trademark Office Patents,
(Sept. 1, 1998) Vol. 1214, No. 1, pp. 422.
ISSN: 0098-1133.
DT Patent
LA English
NCL 623011000
CC Blood, Blood-Forming Organs and Body Fluids - General; Methods *15001
Immunology and Immunochemistry - General; Methods *34502
Anatomy and Histology, General and Comparative - Regeneration and
Transplantation *11107
Cytology and Cytochemistry - General *02502
General Biology - Miscellaneous *00532
IT Major Concepts
Blood and Lymphatics (Transport and Circulation); Cell Biology; General
Life Studies; Immune System (Chemical Coordination and Homeostasis);
Surgery (Medical Sciences)
IT Miscellaneous Descriptors
BIOTECHNOLOGY; DONOR SOURCE; RECONSTITUTING CELLS; TRANSPLANT

L99 ANSWER 2 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.
AN 2000:44783 BIOSIS
DN PREV200000044783
TI Unrelated donor marrow transplantation using a preparative regimen of
fractionated TBI, thiotepe, **fludarabine**, and ATG.
AU Langston, A. A. (1); Redei, I. (1); Bucur, S. (1); Allen, A. (1); Cherry,
J. K. (1); Bartlett, V. (1); **Waller, E. K. (1)**
CS (1) Bone Marrow and Stem Transplant Center, Emory University, Atlanta, GA
USA
SO Blood, (Nov. 15) Vol. 94, No. 10 SUPPL. 1 PART 2, pp. 392b.
Meeting Info.: **Forty-first Annual Meeting of the American Society of
Hematology** New Orleans, Louisiana, USA December 3-7, 1999 The
American Society of Hematology
. ISSN: 0006-4971.
DT **Conference**
LA English
CC Neoplasms and Neoplastic Agents - General *24002
Biochemical Studies - General *10060
Anatomy and Histology, General and Comparative - Regeneration and
Transplantation *11107
Pathology, General and Miscellaneous - Diagnostic *12504
Blood, Blood-Forming Organs and Body Fluids - General; Methods *15001
Pharmacology - General *22002
Pathology, General and Miscellaneous - Therapy *12512
General Biology - Symposia, Transactions and Proceedings of
Conferences, Congresses, Review Annuals *00520
BC Hominidae 86215
IT Major Concepts
Hematology (Human Medicine, Medical Sciences); Oncology (Human
Medicine, Medical Sciences); Pharmacology
IT Diseases
leukemia: blood and lymphatic disease, neoplastic disease
IT Chemicals & Biochemicals
ATG: antineoplastic - drug; **fludarabine**: antineoplastic -
drug; thiotepe: antineoplastic - drug
IT Alternate Indexing
Leukemia (MeSH)
IT Methods & Equipment
bone marrow transplantation: therapeutic method, transplantation
method, unrelated donor; fractionated TBI [fractionated total body
irradiation]: radiologic method, therapeutic method
IT Miscellaneous Descriptors
Meeting Abstract

ORGN Super Taxa
 Hominidae: Primates, Mammalia, Vertebrata, Chordata, Animalia
 ORGN Organism Name
 human (Hominidae): patient
 ORGN Organism Superterms
 Animals; Chordates; Humans; Mammals; Primates; Vertebrates
 RN 21679-14-1 (FLUDARABINE)
 52-24-4 (THIOTEPA)

L99 ANSWER 3 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.
 AN 1999:254095 BIOSIS
 DN PREV199900254095
 TI Allogeneic blood stem cell transplantation from unrelated donors after nonmyeloablative conditioning therapy.
 AU Bornhaeuser, M.; Neubauer, A.; Thiede, C.; Naumann, R.; Ritter, M.; Geissler, G.; Freiberg-R., J.; Platzbecker, U.; Brendel, C.; Mohr, B.; Ehninger, G.
 CS Dep. Intern. Med. I, Univ. Hosp. Carl Gustav Carus, Dresden Germany
 SO Annals of Hematology, (1999) Vol. 78, No. SUPPL. 2, pp. S50.
 Meeting Info.: International Symposium on Acute Leukemias VIII: Prognostic Factors and Treatment Strategies Muenster, Germany
 February 27-March 3, 1999
 ISSN: 0939-5555.

DT Conference
 LA English
 CC Neoplasms and Neoplastic Agents - Therapeutic Agents; Therapy *24008
 Anatomy and Histology, General and Comparative - Regeneration and Transplantation *11107
 Blood, Blood-Forming Organs and Body Fluids - Blood Cell Studies *15004
 Blood, Blood-Forming Organs and Body Fluids - Blood, Lymphatic and Reticuloendothelial Pathologies *15006
 Blood, Blood-Forming Organs and Body Fluids - Lymphatic Tissue and Reticuloendothelial System *15008
 Pharmacology - Clinical Pharmacology *22005
 Pharmacology - Blood and Hematopoietic Agents *22008
 Pharmacology - Immunological Processes and Allergy *22018
 Neoplasms and Neoplastic Agents - Immunology *24003
 Neoplasms and Neoplastic Agents - Blood and Reticuloendothelial Neoplasms *24010
 Immunology and Immunochemistry - Immunopathology, Tissue Immunology *34508
 General Biology - Symposia, Transactions and Proceedings of Conferences, Congresses, Review Annuals *00520
 Cytology and Cytochemistry - Human *02508
 Genetics and Cytogenetics - Human *03508
 Biochemical Studies - General *10060
 Biochemical Studies - Nucleic Acids, Purines and Pyrimidines *10062
 Biochemical Studies - Proteins, Peptides and Amino Acids *10064
 Biochemical Studies - Carbohydrates *10068
 Pathology, General and Miscellaneous - Therapy *12512
 Blood, Blood-Forming Organs and Body Fluids - General; Methods *15001

BC Hominidae 86215
 IT Major Concepts
 Oncology (Human Medicine, Medical Sciences)
 IT Diseases
 acute lymphoblastic leukemia: blood and lymphatic disease, treatment, neoplastic disease; acute myeloid leukemia: blood and lymphatic disease, treatment, neoplastic disease; chronic myeloid leukemia: blood and lymphatic disease, neoplastic disease, treatment
 IT Chemicals & Biochemicals
 antithymocyte globulin: antineoplastic - drug, combination therapy, immunosuppressant - drug; busulfan: antineoplastic - drug, combination therapy; fludarabine: antineoplastic - drug, combination

therapy

IT Alternate Indexing
Leukemia, Lymphocytic, Acute (MeSH); Leukemia, Myeloid (MeSH);
Leukemia, Myeloid, Chronic (MeSH)

IT Methods & Equipment
allogeneic blood stem cell transplantation: transplantation method,
unrelated donor cell use; nonmyeloablative conditioning therapy:
therapeutic method

IT Miscellaneous Descriptors
Meeting Abstract; Meeting Poster

ORGN Super Taxa
Hominidae: Primates, Mammalia, Vertebrata, Chordata, Animalia

ORGN Organism Name
human (Hominidae): patient

ORGN Organism Superterms
Animals; Chordates; Humans; Mammals; Primates; Vertebrates

RN 55-98-1 (BUSULFAN)
21679-14-1 (FLUDARABINE)

L99 ANSWER 4 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.

AN 1999:189466 BIOSIS

DN PREV199900189466

TI Unrelated allogeneic blood stem cell transplantation after nonablative
conditioning.

AU Ehninger, G.; Neubauer, A.; Thiede, C.; Naumann, R.; Ritter, M.; Geissler,
G.; Freiberg-R., J.; Platzbecker, U.; Brendel, C.; Mohr, B.; Bornhaeuser,
M.

CS Dep. Internal Med. I, Univ. Hosp. Carl Gustav Carus, Dresden Germany

SO Annals of Hematology, (1999) Vol. 78, No. SUPPL. 2, pp. S20.
Meeting Info.: **International Symposium on Acute Leukemias VIII:
Prognostic Factors and Treatment Strategies** Muenster, Germany
February 27-March 3, 1999
ISSN: 0939-5555.

DT **Conference**

LA English

CC Neoplasms and Neoplastic Agents - General *24002
Biochemical Studies - General *10060
**Anatomy and Histology, General and Comparative - Regeneration and
Transplantation *11107**
Pathology, General and Miscellaneous - Diagnostic *12504
Pathology, General and Miscellaneous - Therapy *12512
Blood, Blood-Forming Organs and Body Fluids - General; Methods *15001
Pharmacology - General *22002
Immunology and Immunochemistry - General; Methods *34502
**General Biology - Symposia, Transactions and Proceedings of
Conferences, Congresses, Review Annuals *00520**

BC Hominidae 86215

IT Major Concepts
Hematology (Human Medicine, Medical Sciences); Oncology (Human
Medicine, Medical Sciences)

IT Diseases
leukemia: blood and lymphatic disease, diagnosis, treatment, neoplastic
disease

IT Chemicals & Biochemicals
busulphan: immunosuppressant - drug; cyclosporine: immunosuppressant -
drug; **fludarabine**: immunosuppressant - drug; methotrexate:
immunosuppressant - drug; ATG [anti-T lymphocyte globulin]:
immunosuppressant - drug

IT Alternate Indexing
Leukemia (MeSH)

IT Methods & Equipment
allogenic blood stem cell transplantation: nonablative conditioning,
transplantation method

IT Miscellaneous Descriptors
Meeting Abstract

ORGN Super Taxa
Hominidae: Primates, Mammalia, Vertebrata, Chordata, Animalia

ORGN Organism Name
human (Hominidae): donor, recipient, patient

ORGN Organism Superterms
Animals; Chordates; Humans; Mammals; Primates; Vertebrates

RN 59865-13-3Q (CYCLOSPORINE)
63798-73-2Q (CYCLOSPORINE)
59-05-2 (METHOTREXATE)
55-98-1 (BUSULPHAN)
21679-14-1 (FLUDARABINE)

L99 ANSWER 5 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.

AN 1996:450871 BIOSIS

DN PREV199699173227

TI Irradiated allogeneic donor lymphocytes have an anti-leukemic effect in mice without producing graft vs host disease.

AU Waller, E. K.; Murray, T. W.; Boyer, M.

CS Bone Marrow Transplant Leukemia Program, Dep. Med., Emory Univ., Atlanta, GA USA

SO Experimental Hematology (Charlottesville), (1996) Vol. 24, No. 9, pp. 1092.
Meeting Info.: 25th Annual Meeting of the International Society for Experimental Hematology New York, New York, USA August 23-27, 1996
ISSN: 0301-472X.

DT Conference

LA English

CC General Biology - Symposia, Transactions and Proceedings of Conferences, Congresses, Review Annuals 00520
Radiation - Radiation and Isotope Techniques *06504
Anatomy and Histology, General and Comparative - Regeneration and Transplantation *11107
Blood, Blood-Forming Organs and Body Fluids - Lymphatic Tissue and Reticuloendothelial System *15008
Neoplasms and Neoplastic Agents - Immunology *24003
Neoplasms and Neoplastic Agents - Therapeutic Agents; Therapy *24008
Neoplasms and Neoplastic Agents - Blood and Reticuloendothelial Neoplasms *24010
Immunology and Immunochemistry - Immunopathology, Tissue Immunology *34508

BC Hominidae 86215
Muridae *86375

IT Major Concepts
Blood and Lymphatics (Transport and Circulation); Clinical Immunology (Human Medicine, Medical Sciences); Oncology (Human Medicine, Medical Sciences); Physiology; Radiology (Medical Sciences)

IT Miscellaneous Descriptors
ANTI-LEUKEMIC EFFECTS; BLOOD AND LYMPHATICS; BONE MARROW TRANSPLANTATION; GRAFT-VS-HOST DISEASE; IMMUNE SYSTEM; IMMUNE SYSTEM DISEASE; IMMUNOTHERAPY; IRRADIATED ALLOGENEIC DONOR LYMPHOCYTES; **MEETING ABSTRACT**; PATIENT; THERAPEUTIC METHOD; TUMOR BIOLOGY

ORGN Super Taxa
Hominidae: Primates, Mammalia, Vertebrata, Chordata, Animalia; Muridae: Rodentia, Mammalia, Vertebrata, Chordata, Animalia

ORGN Organism Name
human (Hominidae); mouse (Muridae)

ORGN Organism Superterms
animals; chordates; humans; mammals; nonhuman mammals; nonhuman vertebrates; primates; rodents; vertebrates

- L99 ANSWER 6 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.
 AN 1996:49963 BIOSIS
 DN PREV199698622098
 TI Allogeneic bone marrow transplantation across a major MHC barrier using T-cell depleted bone marrow in mice.
 AU Waller, E. K. (1); Murray, T. W.
 CS (1) Bone Marrow Transplant Program, Emory Univ Dep. Med., Atlanta, GA USA
 SO Blood, (1995) Vol. 86, No. 10 SUPPL. 1, pp. 571A.
 Meeting Info.: 37th Annual Meeting of the American Society of Hematology Seattle, Washington, USA December 1-5, 1995
 ISSN: 0006-4971.
 DT Conference
 LA English
 CC General Biology - Symposia, Transactions and Proceedings of Conferences, Congresses, Review Annuals 00520
 Cytology and Cytochemistry - Animal *02506
 Anatomy and Histology, General and Comparative - Surgery *11105
 Anatomy and Histology, General and Comparative - Regeneration and Transplantation *11107
 Pathology, General and Miscellaneous - Necrosis 12510
 Pathology, General and Miscellaneous - Therapy *12512
 Blood, Blood-Forming Organs and Body Fluids - Blood Cell Studies *15004
 Blood, Blood-Forming Organs and Body Fluids - Blood, Lymphatic and Reticuloendothelial Pathologies *15006
 Blood, Blood-Forming Organs and Body Fluids - Lymphatic Tissue and Reticuloendothelial System *15008
 Bones, Joints, Fasciae, Connective and Adipose Tissue - Physiology and Biochemistry 18004
 Immunology and Immunochemistry - Immunopathology, Tissue Immunology *34508
 BC Muridae *86375
 IT Major Concepts
 Blood and Lymphatics (Transport and Circulation); Cell Biology; Immune System (Chemical Coordination and Homeostasis); Pathology; Physiology; Surgery (Medical Sciences)
 IT Miscellaneous Descriptors
 GRAFT FAILURE; GRAFT-VS.-HOST DISEASE; MAJOR HISTOCOMPATIBILITY COMPLEX MISMATCHING; MEETING ABSTRACT; MEETING POSTER; SURVIVAL
 ORGN Super Taxa
 Muridae: Rodentia, Mammalia, Vertebrata, Chordata, Animalia
 ORGN Organism Name
 Muridae (Muridae)
 ORGN Organism Superterms
 animals; chordates; mammals; nonhuman vertebrates; nonhuman mammals; rodents; vertebrates
- L99 ANSWER 7 OF 7 BIOSIS COPYRIGHT 2002 BIOLOGICAL ABSTRACTS INC.
 AN 1996:49247 BIOSIS
 DN PREV199698621382
 TI Risk factors for severe acute renal failure (ARF) after matched unrelated donor transplantation (MUDT).
 AU Redei, S.; Geller, R. B.; Devine, S.; O'Toole, K.; Persons, L.; Holland, H. K.; Connaghan, G.; Fleming, W. H.; Heffner, L. T.; Hillyer, C.; Waller, E. K.; Winton, E. F.; Wingard, J. R.
 CS Emory Univ., Atlanta, GA USA
 SO Blood, (1995) Vol. 86, No. 10 SUPPL. 1, pp. 391A.
 Meeting Info.: 37th Annual Meeting of the American Society of Hematology Seattle, Washington, USA December 1-5, 1995
 ISSN: 0006-4971.
 DT Conference
 LA English
 CC General Biology - Symposia, Transactions and Proceedings of

Conferences, Congresses, Review Annuals 00520

Cytology and Cytochemistry - Human 02508

Biochemical Studies - Vitamins 10063

Biochemical Studies - Proteins, Peptides and Amino Acids 10064

Anatomy and Histology, General and Comparative - Regeneration and Transplantation *11107

Pathology, General and Miscellaneous - Therapy *12512

Blood, Blood-Forming Organs and Body Fluids - Blood Cell Studies *15004

Blood, Blood-Forming Organs and Body Fluids - Blood, Lymphatic and Reticuloendothelial Pathologies *15006

Blood, Blood-Forming Organs and Body Fluids - Lymphatic Tissue and Reticuloendothelial System *15008

Urinary System and External Secretions - Pathology *15506

Pharmacology - Clinical Pharmacology *22005

Pharmacology - Blood and Hematopoietic Agents *22008

Neoplasms and Neoplastic Agents - Therapeutic Agents; Therapy *24008

Neoplasms and Neoplastic Agents - Blood and Reticuloendothelial Neoplasms *24010

Immunology and Immunochemistry - Immunopathology, Tissue Immunology *34508

BC Hominidae *86215

IT Major Concepts

Blood and Lymphatics (Transport and Circulation); Clinical Immunology (Human Medicine, Medical Sciences); Hematology (Human Medicine, Medical Sciences); Oncology (Human Medicine, Medical Sciences); Pathology; Pharmacology; Physiology; Urology (Human Medicine, Medical Sciences)

IT Chemicals & Biochemicals

METHOTREXATE

IT Miscellaneous Descriptors

ANTINEOPLASTIC-DRUG; BONE MARROW TRANSPLANTATION; COMPLICATION;
HEMATOLOGIC MALIGNANCY; HLA CLASS I MISMATCH; **MEETING**
ABSTRACT; MEETING POSTER; METHOTREXATE;
RISK FACTOR

ORGN Super Taxa

Hominidae: Primates, Mammalia, Vertebrata, Chordata, Animalia

ORGN Organism Name

human (Hominidae)

ORGN Organism Superterms

animals; chordates; humans; mammals; primates; vertebrates

RN 59-05-2 (METHOTREXATE)

=> fil medline

FILE 'MEDLINE' ENTERED AT 16:47:54 ON 20 JUN 2002

FILE LAST UPDATED: 19 JUN 2002 (20020619/UP). FILE COVERS 1958 TO DATE.

On June 9, 2002, MEDLINE was reloaded. See HELP RLOAD for details.

MEDLINE thesauri in the /CN, /CT, and /MN fields incorporate the MeSH 2002 vocabulary. Enter HELP THESAURUS for details.

THIS FILE CONTAINS CAS REGISTRY NUMBERS FOR EASY AND ACCURATE
SUBSTANCE IDENTIFICATION.

=> d all

L118 ANSWER 1 OF 1 MEDLINE

AN 2001119086 MEDLINE

DN 21063654 PubMed ID: 11122140

TI Short Report: Engraftment of T-cell-depleted allogeneic haematopoietic stem cells using a reduced intensity conditioning regimen.

AU Craddock C; Bardy P; Kreiter S; Johnston R; Apperley J; Marks D; Huber C;
 Kolbe K; Goulding R; Lawler M; Goldman J; Hughes T; Derigs G
 CS Department of Haematology, Queen Elizabeth Hospital, Birmingham, UK..
 Charles.Craddock@university-b.wmids.nhs.uk
 SO BRITISH JOURNAL OF HAEMATOLOGY, (2000 Dec) 111 (3) 797-800.
 Journal code: 0372544. ISSN: 0007-1048.
 CY England: United Kingdom
 DT Journal; Article; (JOURNAL ARTICLE)
 LA English
 FS Priority Journals
 EM 200102
 ED Entered STN: 20010322
 Last Updated on STN: 20010322
 Entered Medline: 20010215
 AB Graft-versus-host disease (GVHD) remains a significant complication in
 patients undergoing allogeneic stem cell transplantation (SCT) using a
 reduced intensity conditioning regimen. Although T-cell depletion (TCD)
 reduces the risk of GVHD after a myeloablative conditioning regimen, it is
 associated with an increased risk of graft failure. We have therefore
 examined whether TCD compromises engraftment using a **fludarabine**
 -based conditioning regimen. Fifteen patients have been transplanted using
 such a regimen of whom 13 underwent ex vivo TCD. All but one patient
 demonstrated durable engraftment and no patient receiving a TCD product
 developed severe GVHD. Thus, TCD may play a role in GvHD prophylaxis using
 such regimens.
 CT Check Tags: Female; Human; Male
 Adult
 Aged
 Graft vs Host Disease: MO, mortality
 *Graft vs Host Disease: PC, prevention & control
 *Hematopoietic Stem Cell Transplantation: MT, methods
 *Leukemia: SU, surgery
 Lymphocyte Depletion: MT, methods
 Middle Age
 Multiple Myeloma: SU, surgery
 *T-Lymphocytes: IM, immunology
 *Transplantation Conditioning: MT, methods
 Transplantation, Homologous

=> d his

(FILE 'HOME' ENTERED AT 15:18:35 ON 20 JUN 2002)
 SET COST OFF

FILE 'REGISTRY' ENTERED AT 15:18:49 ON 20 JUN 2002

	E FLUDARABINE/CN
L1	1 S E3
	E PENTOSTATIN/CN
L2	1 S E3
	E 2CDA/CN
	E 2 CDA/CN
	E 2-CDA/CN
L3	1 S E3
	E 6-MP/CN
L4	1 S E3
	E 6-TG/CN
L5	1 S E3
	E GEMCITABINE/CN
L6	1 S E3
	E ARA-G/CN
	E 506U78/CN
	E 506 U78/CN

E 506-U78/CN
E 2-AMINO-9-D-ARABINOSYL-6-METHOXY-9H-PURINE/CN
E 2-AMINO-9-ARABINOSYL-6-METHOXY-9H-PURINE/CN
E 9H-PURINE, 2-AMINO/CN
E 9H-PURINE, 2-AMINO-6-METHOXY/CN
L7 1 S E4

FILE 'HCAPLUS' ENTERED AT 15:30:12 ON 20 JUN 2002

L8 482 S L1
L9 624 S FLUDARABIN# OR NSC118218 OR NSC118218H OR NSC() (118218 OR 118
L10 717 S L8,L9
L11 605 S L2
L12 186 S PENTOSTATIN#
L13 547 S L3
L14 589 S CLADRIBIN# OR CHLORODEOXYADENOSINE OR 2 CDA OR 2CDA
L15 667 S DEOXYCOFORMYCIN#
L16 2543 S L4
L17 4029 S 6 MP OR MERCAPTOPURINE
L18 1271 S L5
L19 2489 S THIIOGUANINE OR 6 TG
L20 854 S L6
L21 1049 S GEMCITABIN#
L22 34 S ARA G OR 506U78 OR 506 U78
L23 14 S GUANINE ARABINOSIDE

FILE 'REGISTRY' ENTERED AT 15:34:03 ON 20 JUN 2002

L24 1 S 38819-10-2

FILE 'HCAPLUS' ENTERED AT 15:34:42 ON 20 JUN 2002

FILE 'REGISTRY' ENTERED AT 15:35:22 ON 20 JUN 2002

L25 1 S 121032-29-9

FILE 'HCAPLUS' ENTERED AT 15:36:00 ON 20 JUN 2002

L26 19 S L25
L27 11 S NELARABIN# OR NELZARABIN# OR GW 506789
L28 106 S L24
L29 8874 S L11-L23,L26-L28
E TRANSPLANT/CT
E E5+ALL
L30 26426 S E7-E12,E6+NT
E E41+ALL
L31 3775 S E2
L32 59 S L10 AND L30,L31
L33 153 S L29 AND L30,L31
E IMMUNOSUPPRESSANT/CT
E IMMUNOSUPPRESSANT/CT
E E6+ALL
L34 12698 S E5
E E9 ALL
E IMMUNOSUPPRESS/CT
E E8+ALL
L35 11246 S E2+NT
E E6+ALL
L36 5372 S E3+NT
L37 42 S L10 AND L34-L36
L38 308 S L29 AND L34-L36
L39 457 S L32,L33,L37,L38
L40 51 S L39 AND ALLOGEN?
L41 36 S L39 AND ALLOTRANS?
L42 69 S L40,L41
L43 58 S L39 AND HEMATOPO?
E HEMATOPO/CT

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      E E44+ALL
L44      21133 S E5+NT
L45      52 S L44 AND L39
L46      103 S L42,L43,L45
L47      4 S L46 AND NATURAL(L)KILLER(L)CELL
L48      26 S L46 AND T CELL
L49      17 S L46 AND LYMPHOCYT?(L)T
L50      4 S L46 AND MONONUCLEAR(L)CELL
L51      31 S L47-L50
L52      26 S GRAFT(S)HOST AND L46
L53      6 S CYTOMEGAL? AND L46
L54      2 S (HIV OR HUMAN(L)IMMUNODEFICIEN?(L)VIRUS OR IMMUNOCOMP?) AND L
L55      10 S (AIDS OR ACQUIR?(L)IMMUNODEFICIEN?(L)VIRUS?) AND L46
L56      1 S (HUMAN OR ACQUIR?) (L)IMMUNODEFICIEN?(L)SYNDROM? AND L46
L57      37 S L52-L56
L58      15 S L51 AND L57
      E WALLER E/AU
L59      45 S E3,E7,E11
      E HILLYER C/AU
L60      23 S E3-E5
      E ROBACK J/AU
L61      14 S E3-E6
L62      77 S L59-L61
L63      11 S L62 AND L30,L31,L34-L36
      SEL DN AN 7 L63
L64      1 S L63 AND E1-E3
L65      0 S L62 AND L10
L66      0 S L62 AND L29
L67      4 S L63 AND L44
L68      3 S L67 NOT FOSCARNET
L69      3 S L64,L68
      SEL DN AN 2 4 6 7 10 12 13 L58
L70      7 S L58 AND E4-E24
L71      10 S L69,L70
L72      73 S L32,L37
L73      24 S L72 AND (GVHD OR GRAFT(L)HOST(L)DISEASE)
L74      4 S L71 AND L73
L75      20 S L73 NOT L74
      SEL L75 DN AN 1 2 15
L76      3 S L75 AND E25-E31
L77      13 S L71,L76 AND L8-L23,L26-L76
      SEL HIT RN

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FILE 'REGISTRY' ENTERED AT 16:17:36 ON 20 JUN 2002
L78      3 S E32-E34

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FILE 'REGISTRY' ENTERED AT 16:17:53 ON 20 JUN 2002

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FILE 'HCAPLUS' ENTERED AT 16:17:59 ON 20 JUN 2002

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FILE 'BIOSIS' ENTERED AT 16:18:24 ON 20 JUN 2002

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      E WALLER E/AU
L79      124 S E3,E7,E11
      E HILLYER C/AU
L80      114 S E3-E6
      E ROBACK J/AU
L81      34 S E3,E5,E8,E9
L82      320412 S 11107/CC
L83      60 S L79-L81 AND L82
L84      1985 S L10
L85      145 S L82 AND L84
L86      203 S L83,L85
L87      131 S L86 AND (00520/CC OR (CONFERENCE OR CONGRESS OR POSTER OR SYM

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L88 12 S L87 NOT (00520/CC OR CONFERENCE/DT)
 L89 119 S L87 NOT L88
 SEL DN AN L89 9 31
 SEL DN AN L89 9 31 32
 L90 3 S E1-E10 AND L89
 L91 29 S L79 AND L89
 SEL DN AN 1 17 19 21 L91
 L92 4 S L91 AND E11-E18
 L93 6 S L90,L92
 L94 72 S L86 NOT L87-L93
 L95 10 S L94 NOT AB/FA
 L96 1 S L94 AND *02502/CC AND *34502/CC
 L97 1 S L94 AND 02502/CC AND 34502/CC
 L98 1 S L94 AND 02502/CC
 L99 7 S L93,L96-L98

FILE 'BIOSIS' ENTERED AT 16:35:46 ON 20 JUN 2002

FILE 'MEDLINE' ENTERED AT 16:36:04 ON 20 JUN 2002

 E TRANSPLANTATION/CT
 E E3+ALL
 L100 250014 S E3+NT
 L101 106114 S E43+NT
 L102 79195 S E45+NT
 L103 28963 S E44+NT
 L104 1183 S L10
 L105 208 S L104 AND L100-L103
 L106 18 S L105 NOT AB/FA
 E TRANSPLANTATION CONDITIONING/CT
 E E3+ALL
 L107 1442 S E9+NT
 L108 90 S L107 AND L104
 L109 209 S L105,L108
 E HEMATOPO/CT
 E E62+ALL
 E E2+ALL
 L110 222129 S E9+NT
 L111 13 S L109 AND L110
 E NATURAL KILLER CELLS/CT
 E E3 ALL
 E NATURAL KILLER CELLS/CT
 E E3+ALL
 E E2+ALL
 L112 18647 S E20+NT
 E MONONUCLEAR CELL/CT
 E E4+ALL
 E E2+ALL
 L113 389115 S E13+NT
 L114 4 S L111 AND L112,L113
 L115 9 S L111 NOT L114
 L116 196 S L109 NOT L111,L114,L115
 L117 30 S L112,L113,L114 AND L116
 SEL DN AN 17 L117
 L118 1 S L117 AND E1-E3

FILE 'MEDLINE' ENTERED AT 16:47:54 ON 20 JUN 2002